

**FORM
INSP**Rev
X/20**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

05/30/2024

Submitted Date:

06/04/2024

Document Number:

694500667

FIELD INSPECTION FORMLoc ID _____ Inspector Name: _____ On-Site Inspection ☐
NEIDEL, KRIS 2A Doc Num: _____**Operator Information:**

ECMC Operator Number: 46290

Name of Operator: KP KAUFFMAN COMPANY INC

Address: 1700 LINCOLN ST STE 4550

City: DENVER State: CO Zip: 80203

Status Summary:☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

6 Number of Comments

2 Number of Corrective Actions

☒ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

Contact Name	Phone	Email	Comment
Graber, Nikki		nikki.graber@state.co.us	
Fischer, Alex		alex.fischer@state.co.us	
Lara-Mesa, Susana	303-825-4822	cogcc@kpk.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
486848	TANK BATTERY	AC	05/31/2024		-	Overflow Tank	EI

General Comment:

ECMC staff Kris Neidel inspected this tank battery that consist of one AGT. Facility 486848, Weather was 60 degrees. ECMC staff was told by the previous operator that this tank was used as an overflow to the main tank battery secondary containment. No hydrocarbon staining was observed. No tank labels, signs or placard were observed. Corrective Actions: provide Sundry, Form 4 stating the purpose of the tank and intended use. The operator shall provide an evaluation of placarding the tank and secondary containment.

LocationOverall Good: ☐**Signs/Marker:**

Type BATTERY

Comment: No tank labels, signs or placards.

Corrective Action:

Date:

Emergency Contact Number:

Comment: No Emergency contact

Corrective Action:

Date: _____

Overall Good: ☐**Spills:**

Type Area Volume

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
OTHER	1	1000 BBLS	STEEL AST		,

Comment: unsure of actual tank Capacity.

Corrective Action: provide Sundry, Form 4, stating the purpose of the tank and intended use. The operator shall provide an evaluation of placarding the tank and secondary containment.

Date: 06/19/2024

Paint

Condition

Other (Content)

Other (Capacity)

Other (Type)

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate			

Comment: The down gradient portion of containment is not bermed.

Corrective Action: provide Sundry, Form 4, stating the purpose of the tank and intended use. The operator shall provide an evaluation of placarding the tank and secondary containment.

Date: 06/19/2024

Venting:

Yes/No

Comment:

Corrective Action:

Date:

Flaring:

Type

Comment:

Corrective Action:		Date:	
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